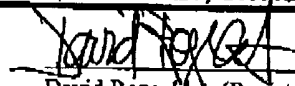
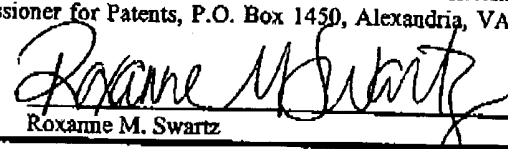


TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/162,860
		Filing Date	November 30, 2000
Total Number of Pages in This Submission		First Named Inventor	Etsuo MORITA
		Group Art Unit	1765
12		Examiner Name	Matthew A. Anderson
		Attorney Docket Number	09792909-4715

ENCLOSURES (check all that apply)						
<input checked="" type="checkbox"/> Transmitted herewith is Response to Notice of Non-Compliant Amendment.						
<input checked="" type="checkbox"/> The fee has been calculated as shown below:						
	(2) CLAIMS REMAINING AFTER AMENDMENT	(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE	
TOTAL CLAIMS	20	20	0	<input type="checkbox"/> x \$9.00 <input type="checkbox"/> x \$18.00	\$0	
INDEPENDENT CLAIMS	4	4	0	<input type="checkbox"/> x \$42.00 <input type="checkbox"/> x \$86.00	\$0	
APPLICATION AMENDED TO CONTAIN ANY MULTIPLE DEPENDENT CLAIMS NOT PREVIOUSLY PAID FOR.			<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> x \$140.00 <input type="checkbox"/> x \$280.00 ONE TIME	\$0	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0	
<input type="checkbox"/> Applicant petitions the Commissioner for Patents to extend the time for responding to the Office Action dated _____ by _____ month(s) for a fee of \$_____ so that the period for response is extended to _____ under 37 C.F.R. § 1.321.						
<input type="checkbox"/> The amount of \$_____ for the Terminal Disclaimer under 37 C.F.R. § 1.321 is included in the enclosed check.						
<input type="checkbox"/> The amount of \$_____ for the Amendment under 37 C.F.R. § 1.312(b) is included in the enclosed check.						
<input type="checkbox"/> The enclosed credit card payment form to charge the amount of \$_____ covers the extension fee and additional claims fee.						
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or to credit any overpayment to Account No. 19-3140. A duplicate of this sheet is enclosed.						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
14. <input checked="" type="checkbox"/> Customer No. 26263						
Dated: February 2, 2004			 David Rozenblat, (Registration No. 47,044)			

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.	
Dated: February 2, 2004	 Roxanne M. Swartz